



Public Health Division 2017 Business Plan



Public Health
Prevent. Promote. Protect.

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City of Bloomington Strategic Priorities

City Council Strategic Priorities	Public Health Division Focus
Community Image	Highlighting positive stories and partnerships that improve the health of Bloomington
Focused Renewal	Equitable investments to improve community health
Inclusion and Equity	Ensuring all of Bloomington is represented in our work
Environmental Sustainability	Responsible stewardship of resources
High Quality Service Delivery	Providing exceptional service to our residents
Community Amenities – Maintain and Expand	Supporting the use of community amenities to improve community health

Public Health Division Overview

Mission Statement:

To promote, protect and improve the health of our community.

Vision Statement:

We are trusted and valued public health experts and leaders committed to a healthy community for everyone.

As a Community Health Board, the City of Bloomington receives state and federal dollars as well as property tax dollars, fees and insurance reimbursement to promote, protect and improve the health and well-being of its residents. The Public Health (PH) Division is responsible for “administration and implementation of programs and services to address the areas of public health responsibility” as defined in the Local Public Health Act (Chapter 145A of Minnesota Statutes). There are six areas of public health responsibility and their primary corresponding budget codes:

1. Assure an adequate public health infrastructure.
 - a. Admin and Planning (160204), DP&C (160206), Community Health & Safety (160201), Family Health (160202), WIC (160207), Health Promotion (160205), SHIP (260265)
2. Promote healthy communities and healthy behaviors
 - a. Health Promotion (160205), SHIP (260265), Admin and Planning (160204), Community Health & Safety (160201), Family Health (160202), WIC (160207), Senior Health (160203)
3. Prevent the spread of communicable disease
 - a. Disease Prevention and Control [DP&C] (160206) and Emergency Preparedness [EP] (260261)
4. Protect against environmental health hazards
 - a. Primarily the responsibility of the Environmental Health Division.

- b. Senior Health (160203) does support work on nuisance properties
- 5. Prepare for and respond to emergencies
 - a. Emergency Preparedness (260261) and Admin and Planning (160204)
- 6. Assuring health services.
 - a. Sage (260250), WIC (160207), TANF (260254), MIECHV2 (260256), Family Health (160202), Community Health & Safety (160201), Senior Health (160203)

Data about the Community we serve in Bloomington¹

Figure 1: Selected Poverty Data for Bloomington

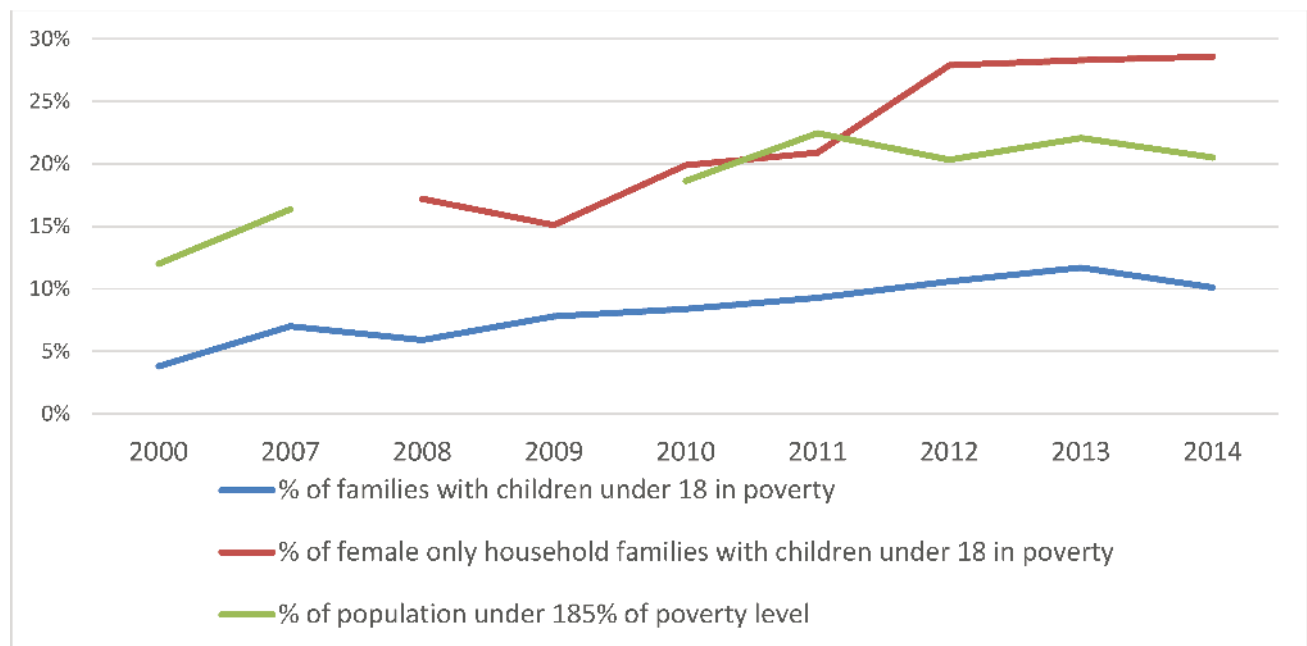
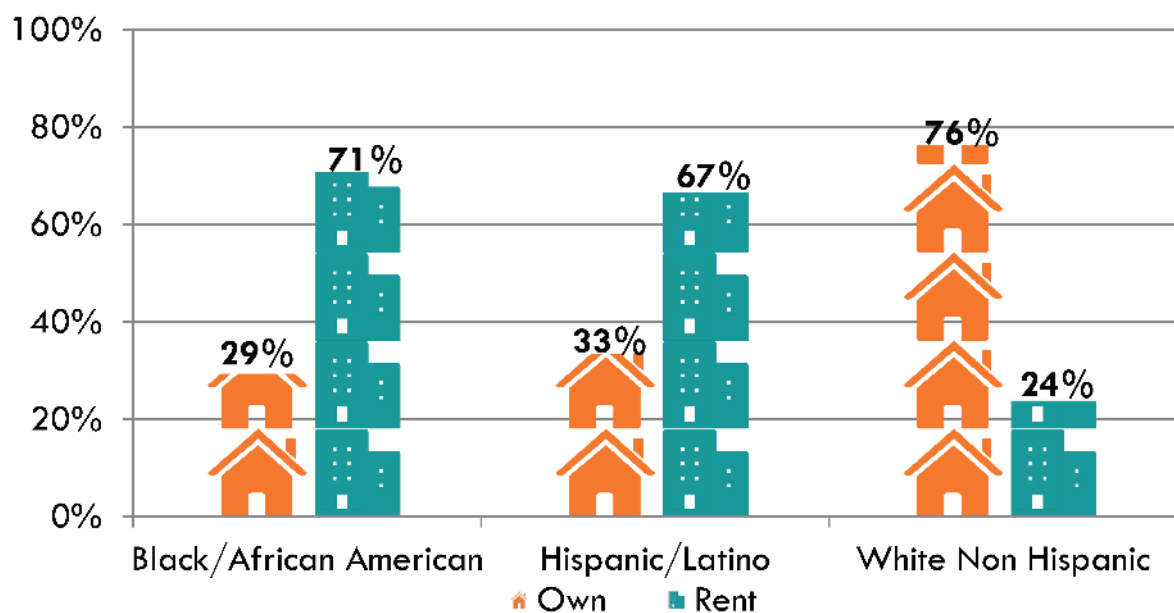
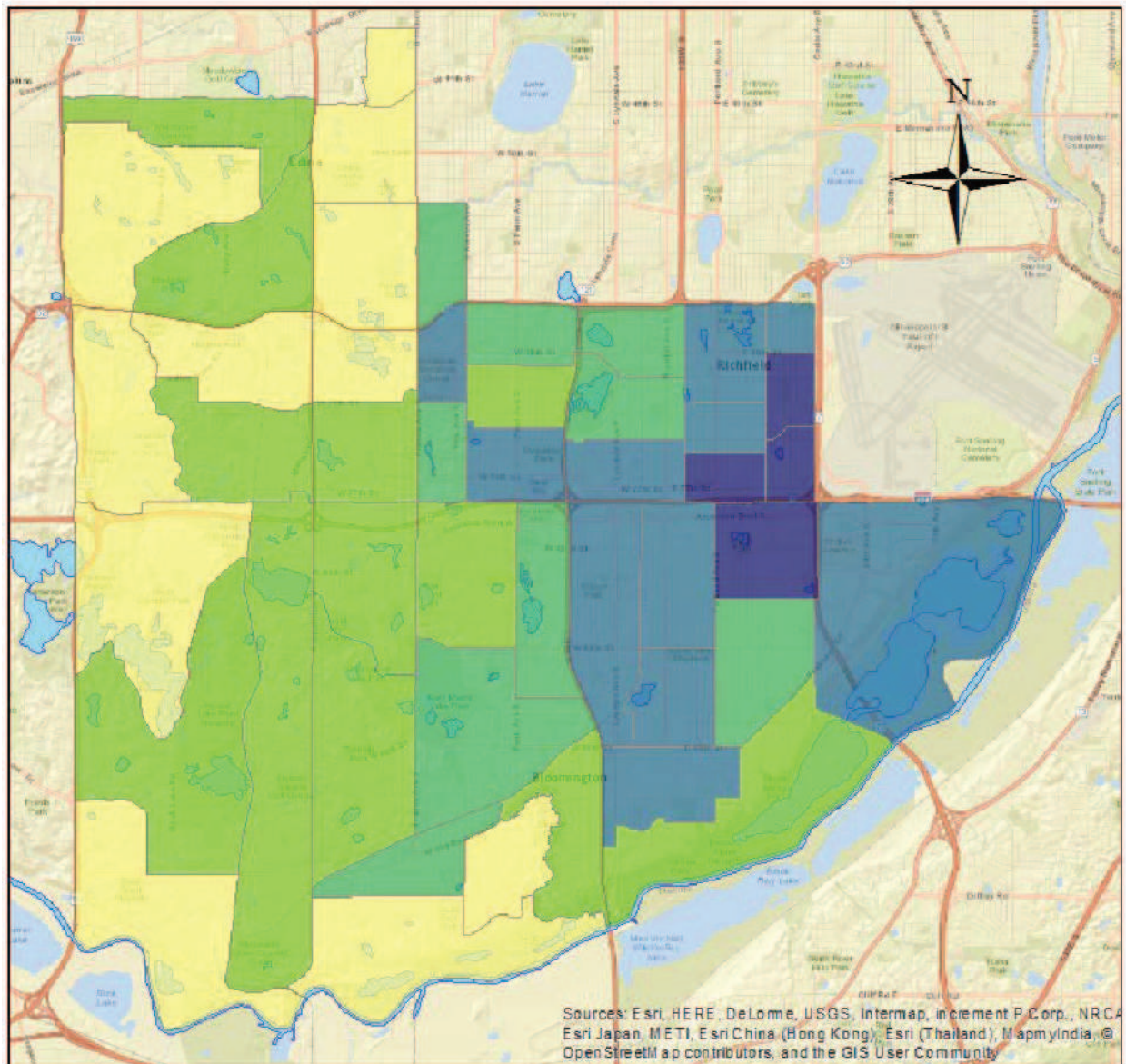


Figure 2: Homeownership and Rental Rates by Race in Bloomington, Edina and Richfield



¹ Data is from the US Census and American Community Survey unless otherwise noted

Figure 3: Percent of Total Population Living at and Below 185% of the Federal Poverty Level in Bloomington, Edina and Richfield



Legend

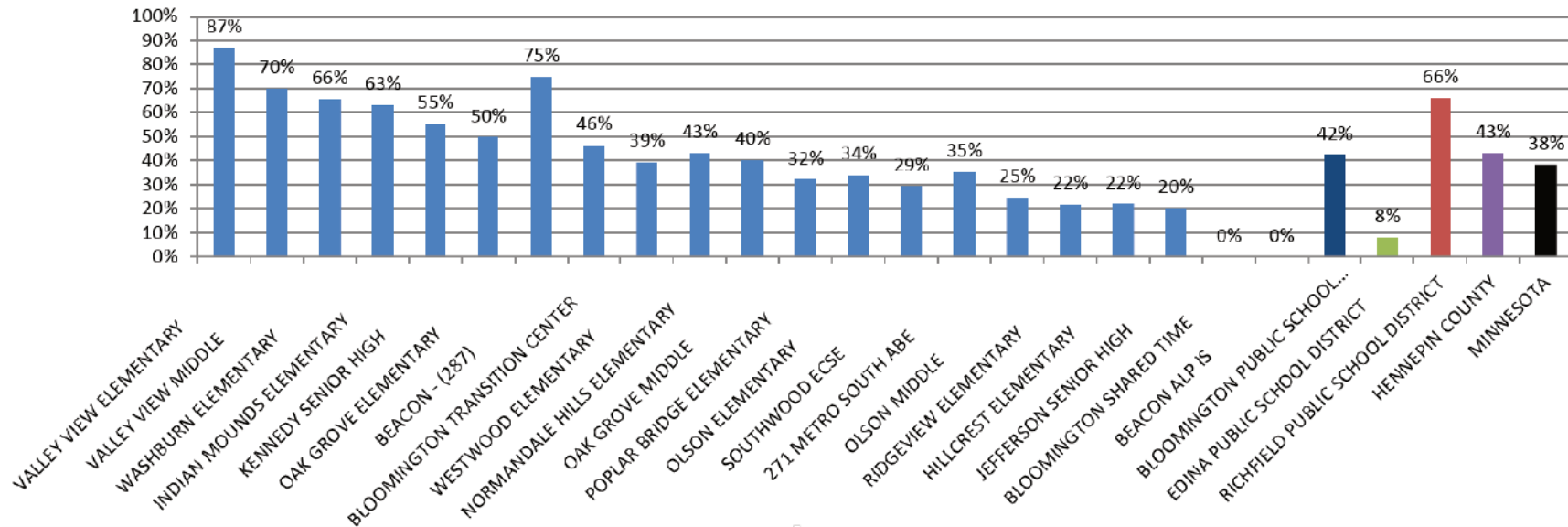
Bloomington, Edina and Richfield

Percent of Total Population Living at 185% and Below Poverty

- Less than 10%
- 10%-20%
- 20%-30%
- 30%-40%
- 40% and Greater

0 0.75 1.5 3 Miles

Percent of Students Enrolled in Free or Reduced Lunch PreK thru 12th Grade 2014-2015



Data from the Minnesota Department of Education

One of the most predictive indicators of the health of an individual and a community is income.² Your socioeconomic status is the primary driver for your health as an individual and that of your community. These impacts are cumulative throughout your life.³ Our community is changing and the complexity of the public health issues are increasing.

² <http://www.health.state.mn.us/divs/opa/2014incomcandhealth.pdf>

³ Halfon et al. Matern Child Health J. 2014 Feb;18(2):344-65

Public Health Division Goals from 2016 Business Plan

2016 Goals			
Evaluate our division's performance against the Public Health Accreditation Board's nationally recognized evidence-based standards			
Deepen the culture of quality improvement and performance management. Work on internalizing equity within our division to better serve our clients			
Cultivate new funding streams			
Implement Statewide Health Improvement Program Initiative strategies			
Promote healthy pregnancy outcomes			
Prevent the spread of infectious diseases through immunization, investigations, consultations and training			
Provide client education on methods to decrease exposure to lead, as well as medical follow-up requirements, to 100% of parents of children referred for an elevated blood lead level			
Provide home assessment to 90% of residents who have been referred for asthma follow-up			
Improve PH's ability to respond to a public health emergency			
Ensure accessible, quality care			
Key:	Completed	Partial Met	Did not complete

Details about each goal and the outcomes can be found on page 13.

Public Health Division Work Plan in Support of City Council Priorities

The Public Health Division is responsible for “administration and implementation of programs and services to address the areas of public health responsibility” as defined in the Local Public Health Act (Chapter 145A of Minnesota Statutes). There are six areas of public health responsibility:

1. Assure an adequate public health infrastructure.
2. Promote healthy communities and healthy behaviors
3. Prevent the spread of communicable disease
4. Protect against environmental health hazards
5. Prepare for and respond to emergencies
6. Assuring health services.

All the work the division does is focused around these six areas of public health responsibility. Each of our grants and contracts provide deliverables and timetables to assure components of these areas of public health responsibility. We structured this business plan with those requirements in mind, focusing on how that work and our tax support will help support the six City Council Strategic Priorities.

Protecting against environmental health hazards is primarily the responsibility of the Environmental Health Division. Public Health supports that work by focusing on the health of the individuals living in properties identified as nuisance properties.

Community Image

Highlighting positive stories and partnerships that improve the health of Bloomington

Goal: Become a nationally accredited public health agency in 2016.

Outcome: Recognition that services provided in the City meet or exceed national standards.

Impact: Improved understanding of the role public health has in ensuring a health community and that we are nationally recognized for that work.

Goal: Share stories of success with the community in support of One Bloomington.

Outcome: At least three additional stories shared broadly in 2017, coordination with communications, to tell success stories involving community partners.

Impact: Increased recognition of community partners role in the One Bloomington image.

Goal: In 2017 improve the utilization of the breastfeeding/diaper changing tent at community events in support of a family friendly one Bloomington.

Outcome: Increase usage tent for feeding children and changing diapers over 2016 numbers.

Impact: Increased recognition of Bloomington sponsored community events supporting young families.

Focused Renewal

Equitable investments to improve community health

Goal: Maintain active participation in the Development Review Committee.

Outcome: Ensure that health impacts of development are taken into consideration.

Impact: Recognition of how development contributes to the health of a community and its residents.

Goal: Maintain active participation in 2040 planning efforts in coordination with Community Development.

Outcome: Ensure that health impacts and equity continue to be a focus in comprehensive planning.

Impact: Continued recognition of City planning efforts being a leader in the metro⁴.

Inclusion and Equity

Ensuring all of Bloomington is represented in our work

Goal: Develop our Divisions first health equity report, which will examine the health disparities that exist in Bloomington by race and socioeconomic status in 2017.

Outcome: A report developed in partnership with community that identifies health disparities.

Impact: Community ownership of their health information, which will help facilitate changes for improved health status.

Goal: By the end of 2017, have all PH division staff complete the Intercultural Development Inventory, through a pilot project with the Minnesota Department of Health.

Outcome: Understanding of the division's cultural competencies.

Impact: Will allow for tailored training of staff to improve our divisions cultural competencies.

Goal: Improve our ability to reach all residents that require our services

Outcome: Review our service delivery in light of health equity report.

Impact: Improved service delivery to at-risk populations.

⁴ The Minnesota Department of Health (MDH) noted that Bloomington met 9 out of the 11 health indicators they evaluated in the 2030 comprehensive plan. MDH evaluated 53 comprehensive plans in the metro and Bloomington was one of the 6 communities that had 9 or more measures met.
<http://www.health.state.mn.us/topics/places/docs/reportone.pdf>

Environmental Sustainability**Responsible stewardship of resources**

Goal: Maintain WIC vouchers support for farmer's market purchases.

Outcome: Ensure that low-income residents have access to environmentally sustainable fresh foods.

Impact: Increased utilization of fresh food by low-income residents.

Goal: Support policies encouraging alternative transportation within the city, such as biking, walking and public transit.

Outcome: Improved residential usage of alternative transportation.

Impact: Improved health status and reduced fossil fuel consumption.

High Quality Service Delivery**Providing exceptional service to our residents**

Goal: In 2016 revamp the division's customer satisfaction evaluation process and evaluate it during 2017.

Outcome: Streamlined customer satisfaction tool and increased customer feedback utilization in our performance management system.

Impact: Will allow for customer data to impact our practices, thus improving our service delivery.

Goal: Improve service outcomes as tracked by performance management system.

Outcome: The division will provide its first performance management report to the Advisory Board of Health in October.

Impact: Reporting on our performance measures will help improve our service outcomes and our accountability to the community.

**Community Amenities –
Maintain and Expand****Supporting the use of community amenities to improve
community health**

Goal: Sustain core public health services to community.

Outcome: Maintain or improve the health status of our community as measured through our community health assessments and performance management system.

Impact: A healthy community is a community that is more likely to use community amenities, be engaged, a productive workforce, and thriving schools.

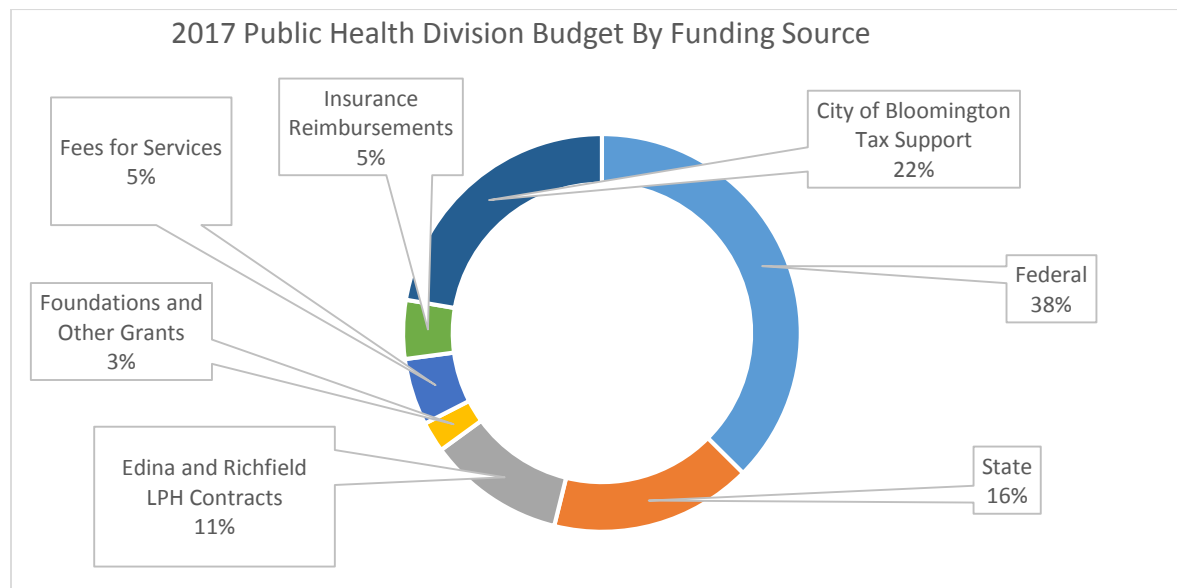
Goal: Continue to actively support work within the City on health in all policies.

Outcome: Actively collaborate with other City divisions and departments to maintain support of health in all policies approach.

Impact: When policies incorporate health, it is the most cost effective way to improve population health.

Budget⁵

The 2017 budget is \$4,110,785 and the 2018 projected budget is \$4,231,087. The budget is broken down by primary funding stream below.



The majority (78%) of the division budget is based on grant, contract, or fee based mandated spending. These funding streams provide some support for administrative and support staff and infrastructure to allow PH to function; however, this support is fixed. Historically PH has used City of Bloomington property tax support funds to enable our staff to increase the number of clients we serve beyond what our grants or contracts will support and to cover the remaining costs associated with administrative and support staff and infrastructure. As fixed costs increase, this requires PH to use less City of Bloomington tax support funds for clients. This puts vulnerable adults and seniors and high-risk mothers and infants at risk when we are not able to offer preventative services, which are significantly cheaper than emergency services.

The Public Health Division continues to provide exceptional service and a strong return on tax dollar investment for the residents of Bloomington. Based on the 2017 proposed budget, City of Bloomington tax support funds would make up 22% of the Public Health Division's total budget with a per capita expense of \$10.80. Bloomington continues to provide services well below the metro area average of 39% and state average of 32% for tax levy funding of community health systems.⁶

⁵ The PH Budget includes both general and special revenue. Our work and staffing in every project area relies on funding in both.

⁶ http://www.health.state.mn.us/ppmrs/library/docs/2014_finance.pdf

Table 1: Ten Year Budget History

	2008	2009	2010	2011	2012	2013	2014	2015	2015 Budget	2016 Budget	2017 Budget	2018 Budget
Expenditures	\$3,353,061	\$3,733,104	\$4,522,149	\$4,651,199	\$4,309,338	\$4,547,551	\$3,999,440	\$4,093,351	\$4,171,442	\$4,049,112	\$4,110,785	\$4,231,087
Revenue	\$2,636,928	\$3,031,619	\$3,875,477	\$3,946,051	\$3,703,076	\$3,848,351	\$3,419,082	\$3,522,878	\$3,494,659	\$3,239,417	\$3,197,983	\$3,214,728
Bloomington Tax Support	\$716,133	\$701,485	\$646,672	\$705,148	\$606,262	\$699,200	\$580,358	\$570,473	\$676,783	\$809,695	\$912,802	\$1,016,359
% of expensus supported by tax	21.36%	18.79%	14.30%	15.16%	14.07%	15.38%	14.51%	13.94%	16.22%	20.00%	22.21%	24.02%
Year over Year increase in Expenditures	1.62%	1.39%	1.16%	6.30%	-2.67%	3.86%	-3.57%	0.50%	3.47%	2.44%	4.28%	3.76%
Year over Year increase in Revenues	-3.53%	2.70%	4.42%	5.42%	1.09%	0.62%	0.77%	1.08%	-0.03%	-2.90%	0.73%	0.79%
City Support Services	\$300,120	\$301,795	\$307,647	\$305,098	\$331,704	\$350,967	\$343,439	\$355,521	\$361,662	\$392,729	\$416,955	\$437,066
% Change	7.30%	0.56%	1.94%	-0.83%	8.72%	5.81%	-2.14%	3.52%	5.31%	8.59%	6.17%	4.82%

Public Health Division Goals and Outcomes from 2016 Business Plan

1. Evaluate our division's performance against the Public Health Accreditation Board's (PHAB) nationally recognized evidence-based standards
 - a. Public Health Accreditation Board site visitors report summary noted:
 - i. "Bloomington Public Health (BPH) appears to have a passionate, well trained staff with extensive depth of experience. Employees were engaged with the site visit and accreditation process and demonstrated enthusiasm for improvements in the department as a result. Bloomington Public Health has a unique jurisdiction and public health service arrangements among the three cities it serves. Moreover, its longstanding partnerships and collegial relationships appear to serve the community well. The department has had several major transitions in leadership and turnover in key staffing in the past few years. However, the department has maintained its commitment to the PHAB process and to continuous quality improvement. Bloomington Public Health holds a respected and expert position in the community, and are sought out for advice, insights, and direct connections to community members. It is evident from the community partners that BPH listens and responds to community needs."
2. Deepen the culture of quality improvement and performance management. Work on internalizing equity within our division to better serve our clients
 - a. Public Health Accreditation Board site visitors report noted identified this as one of our core strengths with the following statement:
 - i. "Bloomington Public Health demonstrated an extensive commitment to quality improvement and performance management efforts across the department. They have implemented new improvements to their previous PM/QI efforts which better met their needs. Management staff have a commitment to developing internal staff leadership skills. Bloomington Public Health has truly adopted the spirit of a culture of quality in the agency."
3. Cultivate new funding streams
 - a. In calendar year 2015 the division applied for thirteen grants and received funding from four of the grants.
 - b. In calendar year 2016, four grants have been applied for and one was funded. We are still waiting on funding decision on two grants. Many of the grants applied for in 2015 are not available in 2016 at this point or have been discontinued by the funder. Two of the four grants applied for in 2016 are new funded sources and we have developed a tool to track grant funding announcements. The grant field has become even more competitive due to decreased number of grants for core public health programs and decreased funding for public health at the state/federal level.
4. Implement Statewide Health Improvement Program Initiative strategies

- a. Our SHIP work plan covers many topic areas and is focused on sustainable solutions that impact policies, systems or environments. The work plan implementation is on track. Topic areas of focus include: healthy community foods, community active living, healthy eating in schools, active living in schools, wellness policies in schools, healthy eating and active living in childcare, healthcare, smoke-free multiunit housing, and worksite wellness.
5. Promote healthy pregnancy outcomes
 - a. We had two goals to promote healthy pregnancy outcomes in our performance management system that have been achieved.

	Goal	Strategy	Performance Measure	Target Annual	Datasource(s) Where will the data come from?	Q3 2015	Q4 2015	Q1 2016	Q2 2016
Family Health	Increase the percentage of healthy pregnancies in BER	Provide healthy pregnancy information to pregnant women in BER who are referred to Family Health	95% of pregnant clients will receive client specific healthy pregnancy information from their public health nurse at home visit(s).	95%	PH Doc Report	41%	52%	100%	100%
			75% of pregnant clients receiving home visits will report they've completed prenatal appointments per their health care provider's recommendation	75%	PH Doc Report	70%	65.50%	87.5%	88%

- b.
6. Prevent the spread of infectious diseases through immunization, investigations, consultations and training.
 - a. We continue to exceed state and county immunization levels.

2014-2015 School year data		DTaP	Polio	MMR	Hep B	Varicella	Tdap	Meningococcal
County	7th grade enrollment	% Vaccinated	% Vaccinated	% Vaccinated	% Vaccinated	% Vaccinated	% Vaccinated	% Vaccinated
Statewide	66,767	98.91%	97.71%	97.37%	97.53%	92.30%	93.83%	92.01%
Hennepin	13,692	95.74%	97.06%	96.94%	96.82%	93.08%	92.89%	90.53%
Bloomington	843	98.10%	98.46%	98.34%	98.22%	96.80%	96.68%	95.26%

7. Provide client education on methods to decrease exposure to lead, as well as medical follow-up requirements, to 100% of parents of children referred for an elevated blood lead level
 - a. In 2015, we received 34 lead referrals of which 4 received a home visit with Environmental Health due to the level of lead detected. The other 30 received education via a phone call and a letter.
 - b. Between January 1, 2016 and June, 30, 2016 we received 21 lead referrals of which 2 received a home visit with Environmental Health staff from the Minnesota Department of Health due to the level of lead detected. The other 19 received education via a phone call and a letter.
8. Provide home assessment to 90% of residents who have been referred for asthma follow-up
 - a. Between January 1, 2015 and June, 30, 2016 we received five referrals for asthma follow up. All five referrals resulted in a home visit to assess the situation. Three of the five referrals ended up not being asthma related. One involved coordinated work between environment health, building inspections, a public health nurse and a public health interpreter to address a mold problem in a rental property.
 - b. In 2016, we are developing a stronger collaborative relationship with the American Lung Association focused on increasing community awareness and

home assessments.

9. Improve PH's ability to respond to a public health emergency.
 - a. On April 26, 2016 three members of the Minnesota Department of Health met with staff from Public Health, the City of Edina and the City of Richfield to evaluate our public health emergency plans. They identified strengths and weaknesses for us to work on over the next five years to improve our ability to respond to public health emergencies.
10. Ensure accessible, quality care.
 - a. We successfully reopened our Sage Screening Clinic in June at the Bloomington Public Health building. The Sage Program offers free breast and cervical exams, pap testing and mammograms for eligible women who are uninsured or underinsured. We have been helping to ensure this type of care since 1991.